BEVERLY EAVES PERDUE GOVERNOR

Fax Number: (____)____

Email: _____



EUGENE A. CONTI, JR. SECRETARY

STATE OF NORTH CAROLINA

DEPARTMENT OF TRANSPORTATION

1540 MAIL SERVICE CENTER, RALEIGH, NC 27699-1540

ADOPT-A-HIGHWAY PROC	GRAM RENEWAL AGREEMENT
The North Carolina Department of Transportation and (name of business, organization or individual) recognize the ne	eed and desirability of litter-free and visually-improved highways.
The Adopt-A-Highway program has been established for community civic organizations as well as private businesses and industry to contribute toward the effort of maintaining cleaner and more beautiful roadsides.	
nature of the work which is to be performed and have agreed to instructions. If the above-named entity enters into a contract v	ny injuries they, their employees or their agents may suffer or or suffer as a result of participation in the program and have
If the above-named entity enters into a contract with a busines highway, it agrees to notify the Director of the Office of Beaut Transportation in writing within ten calendar days of agreement Director of such action may result in termination of the agreen	tification Programs of the North Carolina Department of nt with contract source and acknowledges that failure to notify the
This renewal agreement shall be valid for four years beginning, 20	, 20, and ending
along its section of highway and promote a better environment days written notice to the North Carolina Department of Trans Section Below To Be Co.	r once every three months (or more if necessary) for four years in the community. The entity may cancel this agreement upon 30 sportation. mpleted By Adopting Group P CONTACT PERSONS:
SIGNATURE:	SIGNATURE:
☐ Mr. ☐ Mrs. PRIMARY GROUP CONTACT PERSON	☐ Mr. ☐ Mrs. SECONDARY GROUP CONTACT PERSON
Print Name:	Print Name:
Date:	Date:
Street Address PO Box No.	Street Address PO Box No.
City State Zip Code Home Phone: ()	City State Zip Code Home Phone: ()
Work Phone: ()	Work Phone: ()

Note: For all college or university groups, one contact must be the group's school advisor.

Fax Number: (____)____

Email: _____